2090000027428

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	

A. LUNT

JAN 1 0 2010

EXAMINER

Office Use Only



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12/20/10--01024--033 **60.00





December 21, 2010

JUAN PABLO CONSTAIN 562 NW 82ND PL #317 MIAMI, FL 33126

SUBJECT: ASENCOMEX, LLC Ref. Number: L09000027428

We have received your document for ASENCOMEX, LLC and your check(s) $\stackrel{\omega}{\approx}$ totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 610A00029454

COVER LETTER

· ТО:'

	Registration Secti Division of Corpo				
SUBJEC	T:	ASEN	COMEX, LLC		
			ited Liability Company		
The enclo	osed Articles of Ar	nendment and fee(s) are sul	omitted for filing.		2011
Please ret	turn all correspond	ence concerning this matter	to the following:		2011 JAN -7 PM 4: 32
		JU.	AN PABLO CONSTAII	N	Section 1
			Name of Person		
			ASENCOMEX LLC		22
			Firm/Company		-
		56	2 NW 82 ND PL # 317	,	_
			Address		
		MI	AMI, FLORIDA, 33126	3	_
		· ·	City/State and Zip Code		
		JPCONS E-mail address: (1	STAIN@ASENCOMEX to be used for future annual repor	.COM	
For furthe	er information cond	cerning this matter, please c	all:		
		LO CONSTAIN	at (_305)	9034791	
	Name of Pe	erson	Area Code & D	Daytime Telephone Numbe	r
Enclosed	is a check for the f	ollowing amount:			
	Filing Fee [\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	closed) Certifie	ate of Status &
	Registratio	f Corporations	STREET/CO Registration S Division of C Clifton Build	Corporations	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	nny as it now apper	ars on our records.)
The Articles of Organization for this Limited Liability Company Florida document number L09000027428			and assigned N
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	bility company he	ere:	PM 4: 32
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Comp	pany," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:	8244 NW 14	STREET	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL,	33126	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		our records, <u>ent</u>	er the name of the ne
Name of New Registered Agent:			
New Registered Office Address:	E	nter Florida street	address
	. Florida		
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	NATALIA RONDINEL	562 NW 82ND PL, APT # 317 MIAMI, FLORIDA 33126	Add Remove
<u>MGRM</u>	HELENA GUTIERREZ	562 NW 82ND PL, APT #317 MIAMI,FLORIDA 33126	☐ Add ☑ Remove
			Add Remove Add Remove
D. If amend	ling any other information, enter ch	ange(s) here: (Attach additional sheets, if necessary	Add Remove
Dated	Signature of a fren	nber or authorized representative of a member	
	///	AN PABLO CONSTAIN	
	Ty	ped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00